Legacy Decommissioning
Planning, Savings & Meaningful Data

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Speaker Introduction

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MediQuant, Inc.
Conflict of Interest

- Jon Russell has no real or apparent conflicts of interest to report.
- Tony Paparella has no real or apparent conflicts of interest to report.
Agenda

Learning objectives

Background

How we attained buy-in
  • Socializing concept, setting expectations
  • How we attained goal alignment

Project phases
  • Phase 1: Identify & vet legacy app candidates for retirement – set criteria, involve the right people, decide on a final set of candidates. Identify use cases for legacy data: clinical.
  • Phase 2: Choose technology.
  • Phase 3: Plan retirement phases.
  • Phase 4: Migrate data to Active Archive. Phased in over 3 years.

Business case, ROI

Lessons learned
Learning Objectives

Illustrate the savings of an enterprise legacy decommissioning initiative and how to build a business case

Show which roles within the organization to involve in the process to achieve adoption of a solution

Define the critical principles of legacy decommissioning and how to apply them, including securing adoption of the end users

Define a process for establishing timelines and priorities

Show lessons learned from implementing a decommissioning program
A good decommissioning program must make the data available in real-time to end users.

A good decommissioning program must maintain access to the vital healthcare records without the decommissioned legacy application.

A good program will both retain the data and retire the old system. Savings can equal up to 80% of the costs of maintaining the legacy systems.
The Triumph and the Party....

New EMR and revenue cycle systems installed concurrently

Staff highly engaged in the new HIS implementation

Considered a great success!
… and there was celebration and great merriment across the organization after a successful implementation....
...Then the Hangover

162 legacy applications that were no longer needed

....and the associated costs

**CURE:** retire legacy applications, retain the data in an *active* archive

- Establish good data stewardship
- Identify data to archive and identify data to destroy
- Archive the data to retain its original meaning, essential *active* functions, and make accessible to users
Drivers of Change in the Healthcare Market

**Healthcare Market Transformations**
- Federal mandates
  - ICD-10
  - Meaningful Use
- Acquisitions and mergers
- Budgetary pressure to consolidate applications
- Data-driven healthcare

Legacy Application Replacement & *Retirement*
Drivers of Change in the Healthcare Market

- Cost of maintaining legacy applications
- Data spread over disparate systems

- Compliance: 7 – 28 years
- Continued need for accessing clinical data
- Revenue cycle – billing continues
- Audits: RAC, Medicare, Medicaid, commercial carriers
- Research

Legacy Retirement

Active Archiving
## Critical Success Factors

<table>
<thead>
<tr>
<th>Achieve leadership support for sun-setting all applications</th>
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<tr>
<td>• Involve department leadership to avoid resistance to decommissioning</td>
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| Successful data migration into *active* archive completed before decommissioning – key dependency |

<table>
<thead>
<tr>
<th>Teamwork</th>
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<tr>
<td>• Utilize efforts among many departments instead of maintaining dedicated resources</td>
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<table>
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<tr>
<th>Technology</th>
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<td>• <em>Active</em> archive, ability to handle required workflow</td>
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<table>
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<th>Effective communications</th>
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<td>• Scope is broad and timeline is long</td>
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Project Stages

Stage A  Determine which applications to decommission
- **WHO:** Involve business unit leadership, Compliance, Legal
- **WHEN:** Shortly after selection of new HIS
- **WHAT:** Set criteria, identify use cases for legacy data: clinical, revenue cycle, ERP

Stage B  Choose technology and service – *Active Archive*
- Involve business units in decision
- Get a “partner” to help solve problems; technology to manage workflow

Stage C  Plan retirement phases

Stage D  Migrate data to *Active Archive* & Retire Legacy Applications
- Phased in over 3 years
Selecting Systems to Retire & Data to Retain

Reviewed all 500 of our applications

Identified 162 candidates

Worked with key staff to identify data elements to retain and applications to decommission

We focused for 3 – 3 ½ months on the “Legacy Application Decommissioning Assessment”
What to Archive
Workflow & User Access

No workflow, no GUI

Replicate legacy look, feel and workflow

0%

We retained essential workflow

100%
What to Archive

Amount of Data to Retain

Keep all data from applications

Discard all data from applications

0%

100%

Legal and Compliance agreed on data to retain
Round 1: Engaging Operations
Evaluating Applications for Retirement

- Legacy application specific questionnaire completed for each application
- RFP conducted for Revenue Cycle & Active A/R processing
- Confirmed data retention periods through Legal, HIM, and Compliance sub-committees
- Project planning prioritized based upon cost reduction and contractual obligations
Round 2: Business Engagement
Legacy Retirement Planning Discussions

- Set expectations: not an identical replication of the legacy application
- Involved operations team in archive decision
- Decided on an Active Archive
Building a Business Case

Discovery Work

Revenue Cycle
- Reimbursement/Payment History Records (10 years)
- Master Patient Index/Visit History (permanently)

Clinical
- Adult records (10 years from most recent visit)
- Minor records (28 years)

Data Retention Guideline

Use Case

Revenue Cycle
- Billing/Payment Posting
- RAC Audit Responses

Clinical
- Physicians need to reference for point of care clinical history
- HIM staff ability to respond to ROI requests
<table>
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<tr>
<th>Archiving Options Considered</th>
<th>Details</th>
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<tr>
<td>Retain the legacy system</td>
<td>Expensive and difficult to manage</td>
</tr>
<tr>
<td>Decommission legacy system and destroy data</td>
<td>Non-compliant, high risk, and expensive</td>
</tr>
<tr>
<td>Backup raw data</td>
<td>Print to paper, archive to PDF</td>
</tr>
<tr>
<td>Archive with end user GUI</td>
<td>Static</td>
</tr>
<tr>
<td></td>
<td>Active</td>
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</table>
Why we used an **Active** Archive

Not a “typical” archive

Includes workflow functionality
- Billing accounts for active A/R (2+ years after last DOS)
- Release of Information
- Interoperability

Allows for real-time, end user access

Reporting

Discrete data elements and document images

Secondary use of data
# Building the Business Case

Illustrate savings with ROI Analysis

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<tr>
<th>Elements of Legacy Systems Costs</th>
<th>Benefits of Active Archive</th>
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<tr>
<td>• Software support fees</td>
<td>• Simpler world – one archive vs. many legacy systems</td>
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<tr>
<td>• Hardware support fees</td>
<td>• Drastically reduced costs</td>
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<tr>
<td>• Internal support/help desk staff</td>
<td>• Still able to complete necessary workflows</td>
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<tr>
<td>• Hardware refresh</td>
<td></td>
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<td>• Data center costs</td>
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**NOTE, THIS IS AN OPEN ITEM, WILL SECURE ACCURATE FIGURES SOON:**

- Savings realized over last two years: $xx
- Anticipated savings over 7 years: $yy
Quick Adoption

Uneventful go-live – no calls from users, including physicians

The Active Archive was easy to use
- Configured for end users
- Use cases were satisfied

Stakeholders were included in the selection and implementation process
Recommendations/Lessons Learned

- Start early – ideally at the same time as selection of new HIS or during merger
- Include the business unit stakeholders: Revenue Cycle, Clinicians, HIM, Finance/HR
- Manage expectations within the organization with a project plan and budget
- Engage in data retention ‘road mapping’
- Set expectations early – active archive vs. the legacy applications
- Ensure a successful program with your own internal project manager/coordinator
- Ensure validation beyond a simple record count
A good decommissioning program must make the data available in real-time to end users.

A good decommissioning program must maintain access to the vital healthcare records without the decommissioned legacy application.

A good program will both retain the data and retire the old system. Savings can equal up to 80% of the costs of maintaining the legacy systems.
Questions

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